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PTO/SB/01 (10-00)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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<b>DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)</b>  <input checked="" type="checkbox"/> Declaration Submitted with Initial Filing <input type="checkbox"/> Declaration Submitted after Initial Filing      OR      Initial Filing (Surcharge (37 CFR 1.16(e)) required)	Attorney Docket Number	DDI-5032		
	First Named Inventor	David K. Lang		
	COMPLETE IF KNOWN			
	Application Number	Unknown		
	Filing Date	Herewith		
	Group Art Unit	Not Yet Assigned		
	Examiner Name	Not Yet Assigned		
<b>As a below named inventor, I hereby declare that:</b>  My residence, mailing address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:  <b>MEDICAL DEVICE PACKAGE WITH DEFORMABLE PROJECTIONS</b> <i>(Title of the Invention)</i>  the specification of which  <input checked="" type="checkbox"/> is attached hereto  OR  <input type="checkbox"/> was filed on (MM/DD/YYYY) <input type="text"/> as United States Application Number or PCT International Application Number <input type="text"/> and was amended on (MM/DD/YYYY) <input type="text"/>  I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.  I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.  I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.				
<b>Prior Foreign Application Number(s)</b>	<b>Country</b>	<b>Foreign Filing Date (MM/DD/YYYY)</b>	<b>Priority Not Claimed</b>	<b>Certified Copy Attached?</b> YES      NO
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
<input type="checkbox"/> Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:				

### DECLARATION - Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	
		<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, § 1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

Application Serial No.	Filing Date	Status

I hereby appoint:

☒ Practitioners at Customer Number **000027777** →

Place Customer  
Number Bar Code  
Label Here

**AND**

☒ Practitioner(s) named below:

Name	Registration Number
Mayumi Maeda	40,075
Bernard E. Shay	32,061
Paul Coletti	32,019
Mark Warfield	33,463

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Address all telephone calls to Mayumi Maeda at telephone number (408) 956-4790

Direct all correspondence to: Customer Number ☒ or Bar Code Label **000027777** OR ☐ Correspondence address below

Name:

Address:

Address:

City:

State:

ZIP

Country

Telephone:

Fax:

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name  
(first and middle (if any)) DAVID K.

Family Name  
or Surname LANG

Inventor's  
Signature

Date

Residence: City Inverness

State Inverness-shire

Country GB

Citizenship GB

Mailing Address Kin-Brae House, 36 Culduthel Road

City Inverness

State Inverness-shire

ZIP IV2 4AP

Country GB

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name  
(first and middle (if any)) GEORGE

Family Name  
or Surname SANSOM

Inventor's  
Signature

Date

Residence: City

State

Country

Citizenship

Mailing Address

City

State

ZIP

Country

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF THIRD INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name  
(first and middle (if any)) JERRY

Family Name  
or Surname PUGH

Inventor's  
Signature

Date

31 March 04

Residence: City Mountain View

State CA

Country US

Citizenship US

Mailing Address 435 Rhone Court

City Mountain View

State CA

ZIP 94043

Country US

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF FOURTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)) BRYAN		Family Name or Surname WINDUS-SMITH	
Inventor's Signature		Date	
Residence: City Forres, Moray	State Inverness-shire	Country GB	Citizenship GB
Mailing Address 21 Knochromie Gardens			
City Forres, Moray	State Inverness-shire	ZIP IV36 2TN	Country GB
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NAME OF FIFTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)) EMMA VANESSA JAYNE		Family Name or Surname DAY	
Inventor's Signature		Date	
Residence: City Cawdor	State Naim	Country GB	Citizenship GB
Mailing Address Whinhill Cottage			
City Cawdor	State Naim	ZIP IV12 5RF	Country GB
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF SIXTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)) GREGORY JEAN PAUL		Family Name or Surname ELDIN	
Inventor's Signature		Date	
Residence: City Paris	State	Country FR	Citizenship FR
Mailing Address 97 Rue Petit			
City Paris	State	ZIP 75019	Country FR

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<p>the specification of which</p> <p><input checked="" type="checkbox"/> is attached hereto</p> <p>OR</p> <p><input type="checkbox"/> was filed on (MM/DD/YYYY) <input type="text"/> as United States Application Number or PCT International Application Number <input type="text"/> and was amended on (MM/DD/YYYY) <input type="text"/></p> <p>I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.</p> <p>I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.</p>															
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Application Serial No.	Filing Date	Status										
I hereby appoint: <div style="float: right; text-align: right;">Place Customer Number Bar Code Label Here</div> <div style="clear: both;"></div> <div style="display: flex; justify-content: space-between; align-items: flex-start;"> <div style="width: 60%;"> <input checked="" type="checkbox"/> Practitioners at Customer Number <span style="border: 1px solid black; padding: 2px;">000027777</span> —               </div> <div style="width: 35%; text-align: center;">                 AND               </div> </div> <div style="margin-top: 10px;"> <input checked="" type="checkbox"/> Practitioner(s) named below:           </div> <table style="width: 100%; margin-top: 5px;"> <thead> <tr> <th style="text-align: left; width: 40%;"><u>Name</u></th> <th style="text-align: left; width: 60%;"><u>Registration Number</u></th> </tr> </thead> <tbody> <tr> <td>Mayumi Maeda</td> <td>40,075</td> </tr> <tr> <td>Bernard E. Shay</td> <td>32,061</td> </tr> <tr> <td>Paul Coletti</td> <td>32,019</td> </tr> <tr> <td>Mark Warfield</td> <td>33,463</td> </tr> </tbody> </table> <p>as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.</p>			<u>Name</u>	<u>Registration Number</u>	Mayumi Maeda	40,075	Bernard E. Shay	32,061	Paul Coletti	32,019	Mark Warfield	33,463
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Address all telephone calls to Mayumi Maeda at telephone number (408) 956-4790												
Direct all correspondence to: <div style="display: flex; align-items: center; justify-content: space-between;"> <div> <input checked="" type="checkbox"/> Customer Number or Bar Code Label             </div> <div style="border: 1px solid black; padding: 2px;">000027777</div> <div>OR</div> <div> <input type="checkbox"/> Correspondence address below             </div> </div>												
Name:												
Address:												
Address:												
City:	State:	ZIP										
Country	Telephone:	Fax:										

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:

☐ A petition has been filed for this unsigned inventorGiven Name  
(first and middle [if any]) DAVID K.Family Name  
or Surname LANGInventor's  
Signature

David Lang

Date

31 MAR 04.

Residence: City Inverness

State Inverness-shire

Country GB

Citizenship GB

Mailing Address Kin-Bras House, 36 Culduthel Road

City Inverness

State Inverness-shire

ZIP IV2 4AP

Country GB

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NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventorGiven Name  
(first and middle [if any]) GORDON G. GEORGEFamily Name  
or Surname SANSOMInventor's  
Signature

Gordon G. Sansom

Date

31-MAR-2004

Residence: City INVERNESS

State INVERNESS-SHIRE

Country UK

Citizenship UK

Mailing Address ANTIFIELD HOUSE, SCARIPORT

City INVERNESS

State INVERNESS-SHIRE

ZIP IV2 6DN

Country UK

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NAME OF THIRD INVENTOR:

☐ A petition has been filed for this unsigned inventorGiven Name  
(first and middle [if any]) JERRYFamily Name  
or Surname PUGHInventor's  
Signature

Date

Residence: City Mountain View

State CA

Country US

Citizenship US

Mailing Address 435 Rhone Court

City Mountain View

State CA

ZIP 94043

Country US

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF FOURTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)) BRYAN		Family Name or Surname WINDUS-SMITH	
Inventor's Signature <i>Bryan Windus-Smith</i>		Date 31 MAR 04	
Residence: City Forres, Moray	State Inverness-shire	Country GB	Citizenship GB
Mailing Address 21 Knochmie Gardens			
City Forres, Moray	State Inverness-shire	ZIP IV36 2TN	Country GB

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NAME OF FIFTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)) EMMA VANESSA JAYNE		Family Name or Surname DAY	
Inventor's Signature <i>Emma Day</i>		Date 31 <sup>ST</sup> MARCH 2004	
Residence: City Naim	State	Country GB	Citizenship GB
Mailing Address Whinhill Cottage, Cawdor			
City Naim	State	ZIP IV12 5RF	Country GB

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SIXTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)) GREGORY JEAN PAUL		Family Name or Surname ELDIN	
Inventor's Signature		Date	
Residence: City Paris	State	Country FR	Citizenship FR
Mailing Address 97 Rue Petit			
City Paris	State	ZIP 75019	Country FR